

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER a: GENERAL PROVISIONS

PART 101
GENERAL ADMINISTRATIVE PROVISIONS

Section

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Section 101.1 Incorporation by Reference

Any rules or regulations of an agency of the United States or of a nationally recognized organization or association that are incorporated by reference in this Part are incorporated as of the date specified, and do not include any later amendments or editions.

(Source: Added at 13 Ill. Reg. 3897, effective March 17, 1989)

Section 101.10 Applicability

- a) These Rules apply to activities of the Illinois Department of Public Aid and local governmental units in administering those programs and activities authorized by Sections 1-1 et seq. of the Illinois Public Aid Code (Ill. Rev. Stat. 1981, ch. 23, pars. 1-1 et seq.) and any other applicable statutes.
- b) This codification of Rules incorporates into one set the Rules of the Department, and replaces the Administrative and Categorical Rules and Regulations and the General Assistance and Local Aid to the Medically Indigent Rules and Regulations previously on file with the Secretary of State. These Rules in no way affect the Rules for Medical Vendor Administrative Proceedings filed and effective on an emergency basis December 27, 1977.
- c) Should any Rule, subdivision, clause, phrase, or provision of these Rules be unconstitutional or invalid for any reason whatsoever, such holdings shall not affect the validity of the remaining portions of these Rules.
- d) All Rules and Regulations of the Illinois Department of Public Aid previously filed with the Secretary of State, with the exception of the Rules for Medical Vendor Administrative Proceedings filed and effective on an emergency basis December 27, 1977, are hereby replaced by this codification.
- e) These Rules shall be operative only to the extent that they do not conflict with any Federal law or regulation governing Federal grants to this State for public assistance programs.

Section 101.20 Definitions

“AABD.” Aid to the Aged, Blind or Disabled--financial assistance and medical assistance available to individuals who have been determined to be aged, blind or disabled as defined by the Social Security Administration.

“Adequate Consideration.” The receipt of goods, monies or services at least in the amount of the fair market value of the property sold.

"Adult Cases." A case in which no child is included in the assistance unit.

“Adverse Action.” Any action which reduces food stamp benefits or terminates participation in the food stamp program within a certification period.

“AFDC.” Aid to Families with Dependent Children--financial assistance and medical assistance available to families with one or more dependent children or in behalf of dependent children placed in foster care by the Department of Children and Family Services (DCFS).

AFDC-F: Medical Assistance for an eligible child under DCFS guardianship.

“Agency Error.” An action or inaction of the Department resulting in assistance benefits being furnished to or in behalf of a client for which the client is not eligible.

“Applicant.” An individual requesting assistance by completion of a signed, written application form or a person in whose behalf a signed written application form is completed requesting assistance.

“Application.” A request for assistance by means of a completed, signed designated form. For food stamp purposes, only a name, address and signature are needed on the form.

“Assistance Unit.” The individual or individuals living together for whom the Department determines eligibility and, if eligible, provides financial and/or medical assistance as one unit.

“Caretaker Relative.” A relative, as specified below, with whom a child must live to be eligible for TANF and who is providing care, supervision and a home for the child.

Blood or adoptive relatives within the fifth degree of kinship:

Father - Mother

Brother - Sister

Grandmother - Grandfather (including up to great-great-great)

Uncle - Aunt (including up to great-great)

Nephew - Niece (including up to great-great)

First Cousin

First Cousin once removed (child of first cousin)

Second Cousin (child of great-aunt/uncle)

Step-Relatives:

Step-Father - Step-Mother

Step-Brother - Step-Sister

Person who is or has been married to one of the above relatives

“Categorical Assistance Programs.” TANF, AABD and related MANG programs.

“Categorically Eligible.” The meeting of all eligibility requirements for a categorical assistance program other than financial needs.

“Certification for Food Stamps.” Authorization of eligibility of a household for the food stamp program.

“Certification Period.” The period of time for which a household is authorized to participate in the food stamp program.

“Certifying Office.” The IDPA local office or General Assistance unit office responsible for certification of food stamp program participants.

“Client.” The adult in the family or unit applying for assistance or receiving assistance on behalf of the family.

“Client Error.” A client's mistake, misunderstanding, misrepresentation or concealment of information or failure to report information promptly which results in financial and/or medical assistance being paid to or in behalf of a recipient for which the recipient is not eligible.

“Correspondent.” A specific individual who has been legally designated to handle the affairs of another individual, that is, parents, court appointed guardian or conservator.

“Coupon Allotment.” The total dollar value of the food stamp coupons that a household is authorized to receive.

“DCFS.” Illinois Department of Children and Family Services.

“Department.” The Illinois Department of Public Aid.

“Dependent Child.” A child age 18 or under who is living with a relative. If age 18, the child must be a full-time high school (or equivalent) student.

“DHS.” Illinois Department of Human Services.

“Disbursing Order.” An invoice voucher form given to a client authorizing a vendor to provide specified goods and/or services.

“Disposition of an Application.” The determination of eligibility or ineligibility.

“Diverted Income.” Earned or unearned income of a parent used to meet the needs of ineligible person or persons, including the parent, their dependent child or children or their spouse.

“DMHDD.” Formerly Illinois Department of Mental Health and Developmental Disabilities. Now part of DHS.

“DOC.” Illinois Department of Corrections.

“DOL.” Illinois Department of Labor.

“DORS.” Formerly Illinois Department of Rehabilitation Services. Now part of DHS.

“Earmarked Income.” Income restricted for the use of an individual by court order or by legal stipulation of a contributor. Only income of a child may be considered earmarked for Departmental purposes. The income of an eligible child who has siblings in the home receiving TANF financial assistance cannot be earmarked.

“Earned Income.” Remuneration derived through the receipt of wages or salary for services performed as an employee or profits from activity in which the individual is self-employed.

“Effective Date.” The date for which case action is authorized.

“Enrolled MANG Participant.” Person or unit meeting the nonfinancial factors of eligibility.

“Established Twelve-Month Period.” The period of 12 calendar months over which income is compared to the applicable MANG standard.

“Expedited Issuance.” Authorization of food stamp benefits after the household has been determined to be destitute or to have zero net income.

“Expedited Service.” An immediate processing of a food stamp application and determination of eligibility for expedited issuance.

“Family and Children Assistance Case.” A General Assistance case in which case eligibility is based on the presence of an eligible child.

“FCS.” The Food and Consumer Service of the United States Department of Agriculture.

“Final Administrative Decision.” A decision made by the Department as a result of an appeal. It either upholds or reverses the appealed action or determines a lack of jurisdiction.

“Financial Assistance.” Public Assistance paid in the form of a cash benefit to a recipient for income maintenance needs. Medical assistance and food stamp benefits are not considered financial assistance.

“Financial Factors of Eligibility.” Income, assets and Department levels of assistance.

“Financially Eligible.” The meeting of all financial factors of eligibility.

“Fiscal Month.” Begins on a given day in one calendar month and ends on the day prior to the same given day in the next calendar month.

“Food Coupons.” Same as food stamps.

“Food Stamp Benefits.” The cash value of benefits which a food stamp unit receives from the program.

“Food Stamp Employment and Training.” Employment and training program for food stamp recipients.

“Food Stamp Household or Unit.” For purposes of the food stamp program, a household or unit is defined as any of the following:

- An individual living alone;

- An individual living with others but customarily purchasing food and preparing meals for home consumption separate and apart from others;

- A group of individuals who live together and customarily purchase food and prepare meals together for home consumption or who, because of their relationship, are required to qualify for food stamps as a unit.

“Full-Time Employment.” Employment of 30 hours per week or more.

“GA.” General Assistance -- financial and medical assistance available to eligible needy families or

individuals who are ineligible to receive assistance through a categorical assistance program.

“GA Community Work and Training Program.” A program, applicable to GA outside the City of Chicago only, designed to increase employability of General Assistance recipients through constructive work experience, adult education, vocational training and gainful employment.

“Grant.” The total amount of a monthly financial assistance payment.

“Grant Cases.” Public assistance cases authorized for financial assistance payments to the recipient.

“Head of Household.” The person in whose name application is made for participation in the food stamp program. This person is normally the individual who is the household's primary source of income.

“Health Maintenance Organization (HMO).” Licensed by the Illinois Department of Insurance as a non-profit incorporated agency whose purpose is to provide preventive health care and medical services.

“Healthy Kids.” Early and periodic screening, diagnosis and treatment services provided to children from birth through 20 years of age.

“Hearing.” The actual presentation and consideration of the issue under appeal before a hearing officer of the Department.

“HIB.” Hospital Insurance Benefits provided by Title XVIII of the Social Security Act (Medicare) (42 U.S.C., 1395 et seq.).

“Initial Prorated Entitlement (IPE).” Financial Assistance to cover the period from the initial point of eligibility (application for assistance or initial needs of a person being added to the assistance unit) through two days after the mailing date of the first regular monthly assistance warrant.

“In-Kind Income.” Income received by or paid in behalf of an individual in a form other than money.

“Intermediate Care Facility (ICF).” Provides basic nursing care and other restorative services under periodic medical direction. Many of these services may require skill in administration. Such facilities are for residents who have long term illnesses or disabilities which may have reached a relatively stable plateau.

“Intermediate Care Facility for the Mentally Retarded (ICF/MR).” Provides primarily for ambulatory adults with developmental disabilities and addresses itself to the needs of mentally retarded and/or with related conditions. Such facilities are for residents who have physical, intellectual, social and emotional needs.

“JTPA.” Job Training Partnership Act.

“Local Governmental Unit.” Every county, city, village, incorporated town or township charged with the duty of providing public aid under General Assistance and County Veterans Assistance Commissions providing assistance to indigent war veterans and their families.

“Local Office.” Department of Public Aid offices which serve clients living within a designated geographical area.

“Lump-Sum Payment.” An extraordinary or non-recurring income payment received by a client.

“MAG.” Medical Assistance Grant cases -- medical assistance paid on behalf of a recipient of financial assistance.

“MANG.” Medical Assistance No Grant-cases -- medical assistance paid on behalf of a recipient of categorical assistance who is not receiving financial assistance.

“MANG(AABD).” Medical assistance available to individuals who have sufficient income and assets to meet all maintenance needs other than medical care and who are receiving Supplemental Security Income benefits or who are determined to be aged, blind or disabled by the Department of Public Aid.

“MANG (C).” Medical Assistance to Needy Families with Children -- available to families with one or more children who would qualify for TANF on the basis of non-financial eligibility factors but have sufficient income and assets to meet all maintenance needs other than medical care.

“Medicaid.” Medical assistance issued by the Department under provisions of Title XIX of the Social Security Act (42 U.S.C. 1396); MAG and MANG.

“Medical Assistance.” Medicaid.

“Medical Card.” A means of identification used to verify an individual’s eligibility for medical assistance.

“Medicare.” Payment for medical care under the provisions of Title XVIII of the Social Security Act.

“Migrant Worker.” Any person residing temporarily in and employed in Illinois who moves seasonally from one place to another for the purpose of employment in agricultural activities, including the planting, raising or harvesting of any agricultural or horticultural commodities and the handling, packing or processing of such commodities on the farm where produced or at the point of first processing.

“OASDI.” Old Age, Survivors, and Disability Insurance -- often termed "Social Security".

“OJT.” On the Job Training programs sponsored through the TANF or AFDC JOBS Program, Food Stamp Employment and Training Program or JTPA.

“Participant.” A person taking part in the food stamp program or a Departmental employment and training program.

“Prepaid Health Plan.” An organized system of health care responsible for providing or assuring the delivery of comprehensive health maintenance and treatment services to a voluntarily enrolled population.

“Recipient.” An individual who receives benefits under an assistance program.

“Skilled Nursing Facility (SNF).” A group care facility licensed by the Illinois Department of Public Health which provides skilled nursing care, continuous skilled nursing observations, restorative nursing and other services under professional direction with frequent medical supervision. Such facilities are provided for patients who need the type of care and treatment required during the post acute phase of illness or during reoccurrences of symptoms in long-term illness.

“Skilled Nursing Facility for Pediatrics (SNF/PED).” A group care facility licensed by the Illinois Department of Public Health which provides nursing care and habilitative and/or rehabilitative care to children under eighteen years of age. Such facilities are for residents primarily diagnosed mentally retarded or having related conditions.

“SMIB.” Supplementary Medical Insurance Benefits -- coverage provided under Title XVIII of the Social Security Act for medical services other than hospitalization.

“Specified Relative.” Same as caretaker relative.

“Spenddown.” The amount by which a client's nonexempt income during the eligibility period exceeds the MANG income and asset standards.

“SSA.” The Social Security Administration of the Department of Health and Human Services.

“SSI.” Supplemental Security Income--a program administered by the Social Security Administration providing monthly aid to Aged, Blind and Disabled individuals.

“Student.” An individual who is enrolled at least half time (as defined by the institution) in any grade school, high school, vocational school, technical school, training program or institution of higher education.

Enrollment in a mail, self-study or correspondence course does not meet the definition of a student.

“Supervision.” Exercising of responsibility for the child's welfare by the caretaker.

“TANF.” Temporary Assistance for Needy Families. Financial and medical assistance available to families with one or more dependent children.

“Temporary Caretaker.” Another individual temporarily acting as a caretaker (not included in the assistance unit) when no specified relative is available.

“UI.” Unemployment Insurance Benefits.

“Unearned Income.” All income other than earned income.

“Utilization Control.” Evaluation and review by the Department of a recipient's need for care facility, and certification of a patient's need for care by physicians, DHS staff and Department of Public Health.

“Vendor Payment.” Direct payment to vendors for items or services provided to clients.

“Work and Basic Skills Training Program.” The Department's employment and training program for TANF recipients.

“Work Experience.” A Department program which provides experience in a job.

(Source: Amended at 22 Ill. Reg. 6991, effective April 1, 1998)

Section 101.30 Assistance Programs

- a) The types of assistance programs administered by the Illinois Department of Public Aid include: financial assistance, medical assistance and food stamps.
- b) Financial Assistance Programs -- consists primarily of direct cash payments to recipients. The various financial assistance programs are:
 - 1) Aid to the Aged, Blind or Disabled--State Supplemental Payment
For aged, blind or disabled persons.
 - 2) Temporary Assistance for Needy Families
For families with one or more children.
 - 3) Refugee Resettlement Program (RRP)
For refugees from any country.
 - 4) Repatriate Program
For United States citizens and their dependents returned from a foreign country by the U.S. Department of State.
 - 5) General Assistance
For individuals and families who do not qualify for assistance under the Aid to the Aged, Blind or Disabled (AABD)-State Supplemental Payment (SSP), Temporary Assistance for Needy Families (TANF) or federal Supplement Security Income (SSI) programs and who meet GA program requirements.
- c) Medical Assistance -- under which payments are made to medical providers for services provided to recipients.
 - 1) Medicaid
For persons eligible for financial assistance under the AABD-SSP and TANF programs and for individuals not eligible for financial assistance but who meet the requirements of those programs for medical assistance only. This includes pregnant women of any age with no other children who would be eligible for TANF or MANG (CR) if the child had already been born. Medicaid is provided under the AFDC-F program for children under DCFS guardianship who have been placed in licensed foster care or in the home of a relative.
 - 2) Healthy Kids
A preventative health program for all clients who are under 21 years of age and who are receiving AFDC, AABD, RRA, GA, MANG or TANF. Through Healthy Kids, persons are given periodic screening examinations at certain ages from birth through age 20. The screening is to diagnose and treat health problems at an early stage.
 - 3) General Assistance Medical
For persons receiving financial benefits under the GA program.
- d) Food Stamps -- provides increased food purchasing benefits to recipients. Food Stamp

benefits are available to individuals who meet the eligibility requirements of the Food and Nutrition Service of the U.S. Department of Agriculture in accordance with the Food Stamp Act of 1977 (7 U.S.C. 2017 et seq.).

- e) Title IV-D -- attempts to collect child support payments from absent parents in behalf of children receiving assistance. The Department enlists the cooperation of the caretaker relative in identifying, locating and securing support from an absent parent or parents or putative father. Such support received is subsequently paid directly to the Department.

(Source: Amended at 21 Ill. Reg. 13619, effective October 1, 1997)

Section 101.40 Assistance Program Restrictions

- a) An individual shall be eligible to receive financial assistance under only one of the following types of assistance programs at any one time:
 - 1) Categorical Assistance (TANF or AABD),
 - 2) General Assistance, or
 - 3) Assistance to Refugees, Entrants and Repatriates.
- b) An individual shall be eligible to receive financial and medical assistance in only one case under one assistance program, at any one time, except:
 - 1) An individual who currently receives Categorical Assistance from another State and has established Illinois residence (in accordance with 89 Ill. Adm. Code 112.20, 113.20, 114.20, 120.211, 120.311, or 121.21) may receive Supplemental Categorical Assistance in Illinois when the amount of the Illinois assistance payment level to which the individual is entitled exceeds the amount received from the other State, if the excess is at least \$10.00.
 - 2) An individual who is currently receiving General Assistance shall be eligible to receive GA during the pendency of an application for Categorical Assistance or to receive the difference between the amount of the GA grant and the amount of the Categorical Grant for the month in which the individual is determined eligible for Categorical Assistance.
- c) An individual shall not be eligible to receive food stamps as a member of more than one household at any one time.

(Source: Amended at 21 Ill. Reg. 13619, effective October 1, 1997)

Section 101.50 Reporting Suspected Fraud or Abuse

- a) Any suspected fraud or abuse related to the Medical Assistance, KidCare, Child Support Enforcement, Transitional Assistance, Aid to the Aged, Blind and Disabled, Temporary Assistance to Needy Families, Food Stamp and Child Care Programs, and all other programs administered by the Department or by the Department of Human Services as successor agency to the Department, should be reported:
 - 1) in person or by U.S. Mail to the Office of Inspector General, Department of Public Aid, 404 North Fifth Street, Springfield, Illinois 62702;
 - 2) or by:
 - A) telephone to the Office of Inspector General at 217/524-7658; or
 - B) toll free telephone to the Medicaid and Welfare Fraud Hotline at 800/252-8903; or
 - C) e-mail at oiwebmaster@mail.idpa.state.il.us.
- b) Referrals
 - 1) Referrals of suspected fraud or abuse on the part of providers, contractors, State or other governmental employees, recipients of services or any other person will be accepted.
 - 2) Referrals may be made anonymously.
 - 3) All referrals, other than anonymous referrals, will be acknowledged, either in writing, by telephone, by e-mail or in person, within 30 calendar days after receipt of the referral.
- c) Evaluations
 - 1) All referrals of suspected fraud or abuse will be evaluated within 60 calendar days after receipt of the referral to determine what, if any, follow up action is appropriate.
 - 2) Factors considered during the evaluation of any referral include, but are not limited to:
 - A) source of the allegation;
 - B) quality of the evidence of wrongdoing;
 - C) potential loss to the program; and
 - D) availability of investigative and other resources necessary for successful follow up on the referral.
 - 3) Follow up actions include, but are not limited to, the following measures:
 - A) When the evaluation identifies possible criminal or civil fraud violations of the Medical Assistance Program or the KidCare Program by a medical provider or contractor, the referral shall be sent to the Medicaid Fraud Control Unit of the Illinois State Police for its review for possible criminal investigation.

- B) When the evaluation identifies possible criminal or civil fraud violations of any program by a recipient of services or other private citizen and is eligible for follow up action, the Office of Inspector General may initiate an investigation. Should the investigation establish evidence of a criminal or civil fraud violation, the case may be referred to the appropriate United States Attorney, the Office of Attorney General or the appropriate State's Attorney for prosecutorial consideration.
- C) When the evaluation identifies possible administrative violation and is eligible for follow up action, the Office of Inspector General may initiate a review to determine the appropriate administrative action. Administrative actions include, but are not limited to:
 - i) claims analysis;
 - ii) audit;
 - iii) peer review;
 - iv) recipient restriction;
 - v) eligibility review; or
 - vi) administrative hearing.

(Source: Added at 26 Ill. Reg. 2039, effective February 1, 2002)